Fee Transmittal Form	Under the Pages in This Submission		U.S. Patens are required to respond to a collection Application Number Filling Date First Named Inventor Art Unit Examiner Name Attorney Docket Number	t and Trademark Offic	e; U.S. Des it display 2001 REINE	gh 04/30/2003. O EPARTMENT OI AVS A VAIID OMB C L ER et al	OMB 069 F COM control	MERCE
Firm or Individual name Signature Signature Signature October 12, 2004 CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. M/S: ISSUE FEE	Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts		Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Addre Ferminal Disclaimer Request for Refund CD, Number of CD(s)	Aft to C	Group peal Cor Appeals peal Cor peal Not prietary itus Lette ntify bel	mmunication to and Interference mmunication to ice, Brief, Reply Information er osure(s) (pleasow):	Board ces Group Brief)	d p
Barbara Vance 53420v1	Firm or Individual name Signature Date October 12, 2 I hereby certify that this correspondence is sufficient postage as first class mail in an er the date shown below. M/S: ISSUE Typed or printed name	ERTIFIC being facsin FEE	(Reg. No. 47,815 cl Corporation CATE OF TRANSMISSION mile transmitted to the USPTO or	/MAILING	United S	undria, VA 2231	13-145	0 on

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